Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control n PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 10634871 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTIT (Column 1) (Column 2) FOR **NUMBER FILED NUMBER EXTRA RATE** FEE RATE FE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 =OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) **SMALL ENTITY** SMALL ENTITY **CLAIMS HIGHEST** 4 REMAINING NUMBER **PRESENT RATE** ADDI-**RATE ADI** AMENDMENT **AFTER PREVIOUSLY EXTRA** TIONAL **TION AMENDMENT** PAID FOR FEE FE Total Minus (37 CFR 1.16(c)) X \$ OR X \$ ••• Independent Minus (37 CFR 1.16(b)) X \$ = OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +5 OR + \$ TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** $\mathbf{\omega}$ REMAINING NUMBER **PRESENT** RATE ADDI-RATE ADE NOMENT **AFTER EXTRA PREVIOUSLY** TIONAL TION **AMENDMENT** PAID FOR FEE FEI Total Minus (37 CFR 1.16(c)) X \$_ OR X \$ Independent Minus AME (37 CFR 1.16(b)) X \$ OR ΧŞ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR

| | | (Column 1) | | (Column 2) | (Column 3) | |
|-------|---|---|---------|---|------------------|--|
| ENTC | 2/3/05 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | |
| NOMEN | Total (37 CFR 1 16(c)) | 12 | Minus | 20 | = | |
| ш | Independent (37 CFR 1,16(b)) | | Minus . | ··· 3 | = | |
| AM | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | |

| | RATE | ADDI- TIONAL FEE |
|---|--------------------|------------------------|
| | x \$= | |
| | x \$ = | |
| | + \$= | |
| - | TOTAL ADD'L FEE | |

| | RATE | ADC TION. FEE |
|---|--------------------|---------------------|
| | × \$= | |
| | x \$= | |
| | + \$= | |
| • | TOTAL ADD'L FEE | |

OR

OR

OR

OR

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

[&]quot; If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.